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26308 7590 06/16/2004

**RYAN KROMHOLZ & MANION, S.C.  
POST OFFICE BOX 26618  
MILWAUKEE, WI 53226**

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Linda S. Werzel	(Depositor's name)
<i>Linda S. Werzel</i>	(Signature)
13 September 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/616,426	07/14/2000	Wallace J. Baudry	8115-12394A-PCT US DIVI	7041

TITLE OF INVENTION: ~~US PATENT APPLICATION FOR INVENTION~~ **Epidermal Positioning Mechanism**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	09/16/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEWIS, KIM M	3743	602-054000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Ryan Kromholz & Manion, S.C.**2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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- ☒ Issue Fee  
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(Authorized Signature)

(Date)

*Linda A. Doble* 13 September 2004

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